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AMENDMENTS TO THE CLAIMS

Kindly amend the claims as follows:

1.-14. (Canceled)

15. (Withdrawn) A computer-implemented method of obtaining initial insurance claim data, the method comprising:

receiving an insurance claim from a user;

determining a type of the user;

presenting the user with a first plurality of questions regarding an insurance policy under which the claim is being submitted, the plurality of questions depending on the type of the user;

receiving answers to the first plurality of questions;

determining, responsive to the received answers, whether the insurance claim is covered under a valid insurance policy;

presenting the user with a gateway question, the gateway question depending on the type of the user;

receiving an answer to the gateway question;

presenting the user with a second plurality of questions regarding the insurance claim, a subset of the second plurality of questions determined responsive to the received answer to the gateway question and responsive to the type of the user; and

storing the answers to the first and second plurality of questions in a data format that is usable by an insurance claim system.

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16. (Withdrawn) The method of claim 15, wherein determining the type of the user comprises retrieving profile information of the user that relates to the insurance claim, and wherein the subset of the second plurality of questions is further responsive to the profile information.

17. (Withdrawn) The method of claim 15, wherein storing the answers to the first and second plurality of questions comprises storing the answers in a data format that is usable by a plurality of different proprietary insurance claim systems.

18. (Withdrawn) The method of claim 15, wherein a type of the user is one of insurance policy holder and insurance carrier call center representative.

19. (Withdrawn) The method of claim 15, further comprising receiving from the user one of digital images, photographs, and data that graphically depict a nature of the claim.

20. (Withdrawn) The method of claim 15, wherein a plurality of questions presented to the user has a format, the format responsive to the type of the user.

21. (Withdrawn) A computer-implemented method of interactively depicting and reconstructing damage claimed under an insurance policy, the method comprising:

- (a) presenting a user with a plurality of questions, the questions relating to the damage claimed;
- (b) receiving answers to the plurality of questions;
- (c) generating a graphical depiction of the damage claimed responsive to the answers received;
- (d) presenting the graphical depiction;
- (e) requesting confirmation that the graphical depiction is similar to an actual nature of the damage claimed; and

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(f) upon receiving confirmation, storing the graphical depiction.

22. (Withdrawn) The method of claim 21, further comprising repeating steps (a) through (e) until confirmation is received that the graphical depiction is similar to the actual nature of the damage claimed.

23. (Withdrawn) The method of claim 21 wherein generating a graphical depiction comprises:

determining, responsive to the received answers and responsive to a plurality of digital images stored in a database, a digital image that represents the damage claimed; and

presenting the user with the digital image.

24. (Withdrawn) The method of claim 21 wherein the plurality of questions presented to the user comprises questions relating to a degree of damage sustained and a location of damage sustained.

25. (Currently Amended) A computer-implemented method of determining a type of assignee to whom to assign an insurance claim, the method comprising:

receiving data related to the insurance claim, the data comprising a plurality of data elements, a data element serving as an assignment criterion; determining a score of a data element, the score responsive to scoring rules; determining a score of the insurance claim responsive to a score of at least one a data element;

determining a priority of the insurance claim according to the score of the insurance claim;

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determining a class of the insurance claim according to classing rules; and  
determining a type of assignee to whom to assign the insurance claim according to the  
application of business rules to the score of the insurance claim and the class of  
the insurance claim, wherein the business rules weight the class more highly than  
the score.

## 26.-35. (Cancelled)

36. (Withdrawn) A computer implemented method of accessing, managing, processing, and presenting insurance claim data, the method comprising:

presenting to a user a plurality of insurance claim data, the data stored in a database, the data comprising administrative information, estimate data, and transactional data;  
receiving an edited subset of the plurality of insurance claim data;  
storing the edited subset in the database; and  
providing a plurality of methods to access a plurality of insurance claim processing systems.

37. (Withdrawn) The method of claim 36, further comprising:

attaching additional data to the insurance claim data, the additional data related to the insurance claim data; and  
storing the attached additional data in association with the insurance claim data in the database.

38. (Withdrawn) The method of claim 37, further comprising storing a subset of the attached additional data in an uneditable format that prevents the user from tampering with the data.

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39. (Withdrawn) A computer-implemented method of collecting customer satisfaction information and generating a customer satisfaction index score, the method comprising:

providing a customer with a customer satisfaction survey regarding a service provider that has provided service to the customer, the survey containing a plurality of questions, the survey being stored on a computer system;

receiving answers to the plurality of questions;

generating a customer satisfaction index score for the service provider responsive to the received answers;

transmitting the customer satisfaction index score to a system that assigns an insurance claim to an assignee, the system using the customer satisfaction index score to determine a potential assignee to whom to assign the insurance claim.

40. (Withdrawn) A computer-implemented method of collecting customer satisfaction information and generating a composite customer satisfaction index score, the method comprising:

collecting customer satisfaction information regarding a service provider from a first user according to the method of claim 39;

collecting additional customer satisfaction information regarding the service provider from a second user according to the method of claim 39; and

generating a composite customer satisfaction index score for the service provider based on the customer satisfaction information from the first user and the customer satisfaction information from the second user.

41. (Withdrawn) The method of claim 39, further comprising notifying one of the service provider and an insurance carrier of the receipt of customer satisfaction information regarding

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the service provider that will negatively affect the service provider's customer satisfaction index score.

42. (Withdrawn) A computer-implemented method of aggregating, managing, and communicating insurance claim data, the method comprising:

receiving a plurality of insurance claims, an insurance claim comprising insurance claim data, from a plurality of different insurance carriers;

transmitting the plurality of insurance claims to a plurality of different estimating systems;

receiving a plurality of insurance claim estimates from the plurality of different estimating systems, an estimate comprising estimate data that describes one or more tasks required to satisfy the insurance claim and an estimated cost to an insurance carrier for completing one of these tasks; and

transmitting the plurality of insurance claim estimates to the plurality of different insurance carriers using an open communication method that different insurance carriers are able to utilize.

43. (Withdrawn) The method of claim 42, further comprising attaching, to the initial work assignment data, one of digital images, photographs, and data that depict the nature of work required to satisfy the insurance claim.

44. (Withdrawn) The method of claim 42, further comprising attaching, to the initial work assignment data, supplemental information that describes the claim.

45. (Withdrawn) The method of claim 44, further comprising:

storing the initial work assignment data and attached data locally in a data format that is readable by a plurality of different proprietary insurance claim systems; and

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presenting the data in an organized format.

46. (Withdrawn) The method of claim 44, wherein a subset of the attached data is stored in an uneditable format to prevent a user from tampering with the data.

47. (Withdrawn) A computer-implemented method of auditing data associated with an insurance claim, the method comprising:

receiving insurance claim data, the data comprising initial insurance claim data, and a transaction history of the insurance claim;

determining, by applying a first business rule to the insurance claim data, whether an action is required to fulfill the insurance claim; and

initiating the action required to fulfill the insurance claim, according to a business rule, responsive to determining that an action is required.

48. (Withdrawn) The method of claim 47, wherein applying a first business rule comprises applying governmental insurance regulations to the insurance claim data.

49. (Withdrawn) The method of claim 47, wherein the first business rule is generated from an analysis of trends determined from the plurality of insurance claim data.

50. (Withdrawn) A computer implemented method of auditing a plurality of estimate data associated with an insurance claim comprising:

receiving an estimate and a plurality of estimate data that describes the estimate;

determining, by applying a business rule to the plurality of received estimate data,

whether the estimate is valid and reasonable and whether the estimate is potentially fraudulent;

responsive to a determination that the estimate is valid and reasonable, authorizing the estimate; and

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responsive to a determination that the estimate is not valid or not reasonable, determining, by applying another business rule to the plurality of estimate data, an action for resolving the estimate data.

51. (Withdrawn) A computer implemented method of auditing a plurality of payment request data associated with an insurance claim comprising:

receiving a payment request and a plurality of payment request data that describes the payment request;

determining, by applying a business rule to the plurality of received payment request data, whether the payment request is valid and reasonable and whether the payment request is potentially fraudulent; and

responsive to a determination that the payment request is valid and reasonable, authorizing that the payment request be made; and

responsive to a determination that the payment request is not valid or not reasonable, determining, by applying another business rule to the plurality of payment request data, an action for resolving the payment request data.

52. (Withdrawn) A computer-implemented method of automating an insurance carrier's payments associated with an insurance claim comprising:

receiving a payment request;

directing an insurance carrier system to send a funding request to a bank of the insurance carrier to fund an intermediary trustee bank with an amount of the payment request; and

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directing the trustee bank to pay an entity sending the payment request the amount of the payment request using funds transferred to the trustee bank from the insurance carrier's bank.

53. (Withdrawn) The method of claim 52 wherein a payment to the entity sending the payment request is one of check and electronically using an automated clearinghouse.

54. (Withdrawn) The method of claim 52, further comprising, receiving, prior to directing the trustee bank to pay an entity sending the payment request, confirmation of satisfaction from a customer of the entity sending the payment request, the customer being a recipient of the entity's services under which the payment request is being made.

55. (Withdrawn) The method of claim 52, further comprising, determining, prior to directing the insurance carrier system to send a funding request, whether to approve the payment request by determining whether the insurance claim under which the payment request is being made is valid and by determining whether the payment request is valid.

56. (Withdrawn) The method of claim 55, wherein determining whether the insurance claim under which the payment request is being made is valid comprises interacting with a proprietary database of an insurance carrier system.

57. (Withdrawn) The method of claim 52, further comprising:

tracking a plurality of payment data for each payment made; and  
transmitting a subset of the plurality of payment data to one of the insurance carrier system and the entity sending the payment request.

58. (Withdrawn) The method of claim 52, wherein receiving a payment request comprises receiving a plurality of payment requests, further comprising:

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if at least two payment requests to the same insurance carrier are received and approved, bundling, prior to directing the insurance carrier system to send a funding request to the insurance carrier's bank, the payment requests into a bundled payment request;

wherein directing the insurance carrier system to send a funding request to the insurance carrier's bank comprises directing the insurance carrier system to send the bundled payment request to the insurance carrier's bank.

59. (Withdrawn) The method of claim 58, wherein directing the insurance carrier system to send the bundled payment request to the insurance carrier's bank causes the insurance carrier's bank to transfer an amount equal to the bundled payment request to the intermediary trustee bank.

60. (Withdrawn) The method of claim 58, wherein directing the trustee bank to pay the entity sending the payment request comprises:

directing the intermediary trustee bank to make a bundled payment to the entity sending the payment request, the bundled payment being paid with funds provided by the insurance carrier's bank; and

transmitting data to the entity sending the payment request to allow the entity to disaggregate the bundled payment.

61. (Withdrawn) The method of claim 58, wherein the bundled payment includes a plurality of approved payment requests, wherein one approved payment request is made to a second insurance carrier, the second insurance carrier different from a first insurance carrier to which another approved payment request is made, and wherein directing the trustee bank to pay the entity sending the payment request further comprises:

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directing the intermediary trustee bank to make a bundled payment to a payee using funds provided by a plurality of different insurance carriers' banks; and transmitting a plurality of data to the payee to allow the payee to disaggregate the bundled payment.

62. (Withdrawn) The method of claim 52, wherein the payment request is for services that have been fully completed.

63. (Withdrawn) The method of claim 52, wherein the payment request is for services that have not been fully completed.

64. (Withdrawn) A computer-implemented method of automating an insurance carrier's payments associated with an insurance claim, the method comprising:  
receiving a payment request;  
validating the payment request; and  
causing an amount of a validated payment request to be paid to an entity sending the payment request by transmitting a plurality of data to the payee, which allows the payee to directly debit an insurance carrier's bank account for the amount of the payment request.

65. (Withdrawn) A computer-implemented method of automating an insurance carrier's payments associated with an insurance claim, the method comprising:  
applying a first business rule to an insurance claim assignment to determine whether to make progress payments to an assignee;  
determining, by applying a second business rule, if the assignee is qualified to receive a progress payment, one of whether a condition for making a progress payment is

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satisfied, when the progress payment should be made, and an amount of the progress payment; and

distributing, when the condition that satisfies the second business rule is met, the amount of the progress payment to the assignee.

66. (Withdrawn) A computer-implemented method of assigning an insurance claim for a rental car to a rental car provider, the method comprising:

receiving the insurance claim for a rental car; and

assigning the insurance claim for a rental car to a rental car provider according to the application of a business rule.

67. (Withdrawn) A computer-implemented method of assigning an insurance claim for a rental car to a rental car provider, the method comprising:

retrieving a profile of a potential assignee, the potential assignee being a rental car provider;

scoring the retrieved profile by matching the insurance claim data with the profile according to the application of a business rule;

selecting one potential assignee, the potential assignee having the most highly scored profile; and

assigning the insurance claim for a rental car to the selected potential assignee.

68. (Withdrawn) The method of claim 67, wherein the retrieved profile of a potential assignee contains a customer satisfaction index score and the profile is scored responsive to the customer satisfaction index score.

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69. (Withdrawn) The method of claim 67, wherein the retrieved profile of a potential assignee contains a capacity of the potential assignee to accept an assignment and the profile is scored responsive to the capacity.

70. (Withdrawn) The method of claim 69, wherein the capacity is estimated responsive to a plurality of transaction data.

71. (Withdrawn) The method of claim 67, wherein the profile is retrieved from a database, the database storing data about multiple potential assignees.

72. (Withdrawn) The method of claim 67 further comprising receiving authorization from a user to assign the insurance claim for a rental car to the selected potential assignee having the most highly scored profile, the user being the beneficiary of the assignment being made, the authorization being received prior to assigning the insurance claim for a rental car to the assignee.

73. (Currently Amended) A computer-implemented method of selecting, from a plurality of types of assignees, a type of assignee to whom to assign an insurance claim, comprising:

determining, based on the insurance claim, a claim score;  
determining, based on the insurance claim, a class of the insurance claim; and  
determining, based on the claim score and the class, the type of assignee; and  
assigning the insurance claim to the determined assignee.

74. (Currently Amended) The method of claim 73, wherein an effect of the class on the type of assignee is weighted greater than an effect of the claim score on the type of assignee.

75. (Previously Presented) The method of claim 73, wherein the claim score reflects a severity of the insurance claim.

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76. (Currently Amended) The method of claim 73, wherein the claim score is determined based on one an element of a group containing comprising information regarding an insurance policy, information regarding a party involved in a loss, and information regarding how a loss was reported.

77. (Previously Presented) The method of claim 73, further comprising determining, based on the claim score, a priority of the insurance claim.

78. (Currently Amended) The method of claim 73, wherein an assignee comprises one an element of a group containing comprising an insurance adjuster, a repair facility, an appraiser, and a rental provider.

79. (Previously Presented) The method of claim 73, wherein the insurance claim includes a plurality of data elements, and wherein the claim score is based on these data elements.

80. (Currently Amended) The method of claim 79, wherein an effect of one a first data element on the claim score is greater than an effect of another data element on the claim score.

81. (Previously Presented) The method of claim 79, wherein each data element includes an element score, and wherein the claim score is based on the element scores of the data elements.

82. (Previously Presented) The method of claim 73, further comprising:  
determining a first set of profiles, wherein each profile in the first set represents a potential assignee of the determined type, and wherein each profile in the first set includes a profile score;  
determining a second set of profiles, wherein the second set contains profiles in the first set that have the highest profile scores, and wherein each profile in the second set includes a measure of capacity to complete the insurance claim; and

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determining, from the second set of profiles, a profile with the largest measure of capacity.

83. (Cancelled)

84. (Currently Amended) A system for selecting, from a plurality of types of assignees, a type of assignee to whom to assign an insurance claim, comprising: A computer program product comprising a computer useable medium having computer program logic embodied therein for enabling a computer system to select a type of assignee from a plurality of types of assignees, said computer program logic comprising:

a score determination module configured to determine first computer readable program code for determining, based on the insurance claim, a claim score;  
a class determination module configured to determine second computer readable program code for determining, based on the insurance claim, a class of the insurance claim; and  
a type determination module configured to determine third computer readable program code for determining, based on the claim score and the class, the type of assignee.

85. (Newly Added) The computer program product of claim 84, wherein the third computer readable program code is configured to weight an effect of the class greater than an effect of the claim score in determining the type of assignee.

86. (Newly Added) The computer program product of claim 84, wherein the claim score reflects a severity of the insurance claim.

87. (Newly Added) The computer program product of claim 84, wherein the first computer readable program code determines claim score based on insurance policy information, information regarding a party involved in a loss, or information regarding how a loss was reported.

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88. (Newly Added) The computer program product of claim 84, further comprising computer readable program code for determining, based on the claim score, a priority of the insurance claim.

89. (Newly Added) The computer program product of claim 84, wherein an assignee comprises an insurance adjuster, a repair facility, an appraiser, or a rental provider.

90. (Newly Added) The computer program product of claim 84, wherein the insurance claim includes a plurality of data elements, and wherein the first computer readable program code determines claim score based on these data elements.

91. (Newly Added) The computer program product of claim 84, wherein the first computer readable program code weights an effect of a first data element on the claim score greater than an effect of another data element on the claim score.

92. (Newly Added) The computer program product of claim 91, wherein a data element includes an element score, and wherein the first computer readable program code determines claim score based on the element scores of the data elements.

93. (Newly Added) The computer program product of claim 84, further comprising:  
computer readable program code for determining a first set of profiles, wherein each profile in the first set represents a potential assignee of the determined type, and  
wherein each profile in the first set includes a profile score;  
computer readable program code for determining a second set of profiles, wherein the second set contains profiles in the first set that have the highest profile scores, and  
wherein each profile in the second set includes a measure of capacity to complete the insurance claim; and

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computer readable program code for determining, from the second set of profiles, a profile with the largest measure of capacity.